

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Foster D. Hinshaw, Raymond J. Andraka, David L. Meyers, Sharon L. Miller,  
Michael Sporer, William K. Stewart and Barry M. Zane

Application No.: 10/667,203 Group: 2167

Filed: September 18, 2003 Examiner: Kimberly M. Lovel

Confirmation No.: 7168

For: INTELLIGENT STORAGE DEVICE CONTROLLER



<b>CERTIFICATE OF MAILING OR TRANSMISSION</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
July 3, 2008	_____  Signature
_____ Dawn M. Myers	
_____ Typed or printed name of person signing certificate	

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Reply After Final Rejection Under 37 CFR §1.116 for filing in the above-identified application.

- Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

**The claims fee has been calculated as shown below:**

					SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL	14	MINUS	* 20	0	X \$ 25	\$
INDEP	1	MINUS	** 3	0	X \$105	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$185	\$

\* not fewer than 20

\*\* not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

**The Application Size Fee has been calculated as shown below:**

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to [ ] Sheets
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X \$130	\$[ ]	X \$260	\$[ ]	

**Petition for Extension of Time**

Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.

[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]

**Please charge Deposit Account No. 08-0380 for the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		<b>TOTAL:</b> \$ _____

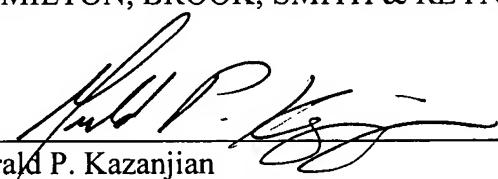
**A check is enclosed in payment of the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	\$ _____
Notice of Appeal		\$ 510
		\$ _____
		<b>TOTAL:</b> \$ 510

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. If this submission is in paper form, a copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By   
Gerald P. Kazanjian  
Registration No.: 61,699  
Telephone (978) 341-0036  
Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 7/3/2008

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	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	14	MINUS	* 20	0	X \$25	\$	X 50	\$
INDEP	1	MINUS	** 3	0	X \$105	\$	X \$210	\$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM								
* not fewer than 20 ** not fewer than 3					TOTAL = \$ 0		TOTAL = \$ 0	

\* not fewer than 20

\*\* not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to
			X \$130	\$[ ]	X \$260	\$[ ]	[ ] Sheets

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<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		<b>TOTAL:</b> \$ _____

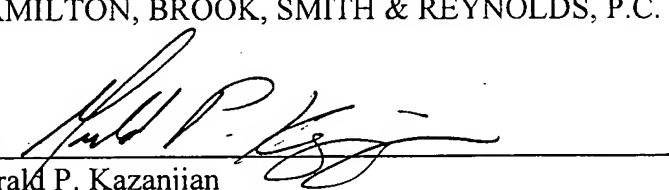
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<input type="checkbox"/>	Application Size Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	\$ _____
Notice of Appeal		\$ 510
		\$ _____
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